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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/895,561
		Filing Date	6/29/01
		First Named Inventor	Niraj Gopal
		Art Unit	2114
		Examiner Name	Le, Dieu Mihn T..
Total Number of Pages in This Submission		Attorney Docket Number	CISCO-3475

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <ul style="list-style-type: none"> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> </ul> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small> <b>return postcard</b>
Remarks		

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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	David B. Ritchie, Reg. No. 31,562 - Thelen Reid & Priest LLP		
Signature			
Date	6/23/2004		

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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CISCO-3475

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Niraj Gopal  
SERIAL NO.: 09/895,561  
FILING DATE: June 29, 2001  
TITLE: METHOD AND APPARATUS FOR CHECKING LEVEL OF SNMP  
MIB SUPPORT BY NETWORK DEVICE  
EXAMINER: Le, Dieu Mihn T.  
ART UNIT: 2114

AMENDMENT

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MS AMENDMENT  
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Dear Sir:

This paper is in response to the Office Action dated May 14, 2004. Please amend the above-identified application as shown.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 24 of this paper.